

CERTIFICATION OF INVOICE

I hereby certify, to the best of my knowledge and belief, that --

(1) The amounts requested are only for performance in accordance with the specifications, terms, and conditions of the contract;

(2) Payments to subcontractors and suppliers have been made from previous payments received under the contract, and timely payments will be made from the proceeds of the payment covered by this certification, in accordance with subcontract agreements and the requirements of Chapter 39 of Title 31, United States Code; and

(3) This request for progress payments does not include any amounts which the prime contractor intends to withhold or retain from a subcontractor or supplier in accordance with the terms and conditions of the subcontract.

Contractor

Name

Contract Number

Title

Invoice Number

Date

BUSINESS DECLARATION

1. Name of Firm: _____ Tax Identification No.: _____
2. Address of Firm: _____
3. Telephone Number of Firm: _____
4. a. Name of Person Making Declaration _____
- b. Telephone Number of Person Making Declaration _____
- c. Position Held in the Company _____
5. Controlling Interest in Company ("X" all appropriate boxes)
- ☐ a. Black American ☐ b. Hispanic American ☐ c. Native American ☐ d. Asian American
- ☐ e. Other Minority (Specify) _____ ☐ f. Other (Specify) _____
- ☐ g. Female ☐ h. Male ☐ i. 8(a) Certified (Certification letter attached) ☐ j. Service Disabled Veteran Small Business
6. Is the person identified in Number 4 above, responsible for day-to-day management and policy decision making, including but not limited to financial and management decisions?
- ☐ a. Yes ☐ b. No (If "NO," provide the name and telephone number of the person who has this authority.) _____
7. Nature of Business (Specify major services/products (NAIC)) _____
8. (a) Years the firm has been in business: _____ (b) No. of Employees _____
9. Type of Ownership: ☐ a. Sole Ownership ☐ b. Partnership
- ☐ c. Other (Explain) _____
10. Gross receipts of the firm for the last three years:
- | | | | |
|-------------------------|---------------------------|-------------------------|---------------------------|
| a.2. Year Ending: _____ | b.2. Gross Receipts _____ | a.1. Year Ending: _____ | b.1. Gross Receipts _____ |
| a.3. Year Ending: _____ | b.3. Gross Receipts _____ | a.3. Year Ending: _____ | b.3. Gross Receipts _____ |
11. Is the firm a small business? ☐ a. Yes ☐ b. No

I DECLARE THAT THE FOREGOING STATEMENTS CONCERNING _____

ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

I AM AWARE THAT I AM SUBJECT TO CRIMINAL PROSECUTION UNDER THE PROVISIONS OF 18 USCS 1001.

12. a. Signature _____ b. Date: _____
- c. Typed Name _____ d. Title: _____

PAST PERFORMANCE SURVEY

Solicitation No. DTFASO-10-R-00104

**Renovation of the Air Conditioning System for the 19 Terminal Doppler Weather Radar
(TDWR) Facilities within the Eastern Service Area**

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To: _____ (Reference Name)
_____ (Company)
_____ (Telephone No.)
_____ (Fax No.)

The Federal Aviation Administration (FAA) is currently evaluating our company/firm, _____, for past performance and customer satisfaction. Since you are one of our past customers it would be greatly appreciated if you would take 5 or 10 minutes to complete the following information and **return to the (FAA) via facsimile to (404) 305-5774, Attn: Kiersten D. Sellers no later than July 2, 2010 at 4:00 pm.**

If you have any questions or comments, feel free to contact me. Thank you in advance for your assistance.

Sincerely,

Please identify the project(s) that this company has performed for your organization, description, city, state, and approximate dollar value:

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Respond to the following on a scale of 1 to 5, with 3 being average or acceptable, and 5 being best.

1. Did the contractor commit adequate resources in timely fashion to the contract to meet the requirements and to successfully solve problems? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
2. To what extent did the contractor respond positively and promptly to technical direction, contract change orders, etc.? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
3. How reliably did the contractor follow through on commitments? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
4. To what extent did the contractor's management system provide visibility into problems and risks? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
5. How responsive do you think the contractor was to information requests, issues, or problems during the course of the contract? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
6. How effective has the contractor been in identifying user requirements? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
7. To what extent did the contractor have the ability to administer and manage the contract? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
8. To what extent did the contractor issue professional correspondence? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
9. How well did the contractor adhere to the Statement of Work? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
10. What was your level of satisfaction with the contractor's management and support staff? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
11. What was your level of satisfaction with the contractor's Supervisor(s)? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
12. To what extent did the contractor submit required reports and documentation in a timely manner 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

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13. To what extent were the contractor's reports and documentation accurate and complete?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
14. To what extent was the contractor's maintenance and problem tracking/reporting documentation timely, accurate and of appropriate content?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
15. To what extent did the contractor comply with safety requirements?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
16. What was your level of satisfaction with the contractor's overall quality of service?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
17. To what extent was the contractor effective in interfacing with the Government staff?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
18. What was your level of overall customer satisfaction?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
19. To what extent were the contractor's employees experienced and qualified?
1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

Respond: Yes or No.

20. Were there any cure notices issued? Yes: ____ No: ____
21. Was contractor pro-active? Yes: ____ No: ____
22. Did contractor suggest cost-saving changes? Yes: ____ No: ____
23. Would you recommend this contractor? Yes: ____ No: ____

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For Federal contracts:

24. Were there any Labor Department Investigations? Yes: ____ No: ____

24a. If yes, please describe reason and final outcome.

25. Were there any safety investigations? Yes: ____ No: ____

25a. If yes, please describe reason and final outcome.

26. Were there any security investigations? Yes: ____ No: ____

26a. If yes, please describe reason and final outcome.

27. Was there a partial or complete termination for default or convenience?

Yes: ____ No: ____

27a. If yes, please describe reason and final outcome.

28. Are there any pending terminations? Yes: ____ No: ____

29. What is/was the duration of the contract? _____

30. Were there any performance issues regarding the contractor's work? If yes, please describe.

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Please provide other comments:

Signature: _____

Company: _____

Date: _____